FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

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DATE RECEIVED

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UNIFORM LIMITED OFFERING EXE	MPTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
SAN DIEGO GAS & ELECTRIC COMPANY, SHORT-TERM NOTES	3005
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	102/39
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
SAN DIEGO GAS & ELECTRIC COMPANY	
Address of Executive Offices (Number and Street, City, State, Zip Cod	e) Telephone Number (Including Area Code)
8330 CENTURY PARK COURT, SAN DIEGO, CA 92123	619/696-2000
Address of Principal Business Operations (Number and Street, City, State, Zip Co (if different from Executive Offices)	de) Telephone Number (Including Area Code)
Brief Description of Business UTILITY FOR SAN DIEGO AND SOUTHERN ORANGE COUNTIES, CALIFORNIA	
business trust limited partnership, to be formed	er (please specify): RECD S.E.C.
Actual or Estimated Date of Incorporation or Organization: 0 4 1965 Actual Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction)	Estimated MAR 69 5
GENERAL INSTRUCTIONS	700-
Endoral	1086

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
• Each promoter of the issuer, if the issuer has been organized within the past five years;	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of	f a class of equity securities of the issuer.
• Each executive officer and director of corporate issuers and of corporate general and managing partners of	f partnership issuers; and
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Z Executive Officer Z Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
GUILES, EDWIN A CHAIRMAN AND CHIEF EXECUTIVE OFFICER	
Business or Residence Address (Number and Street, City, State, Zip Code) 8330 CENTURY PARK COURT, SAN DIEGO, CA 92123	
Check Box(es) that Apply: Promoter Beneficial Owner Z Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
REED, DEBRA L PRESIDENT AND CHIEF OPERATING OFFICER, DIRECTOR	
Business or Residence Address (Number and Street, City, State, Zip Code) 8330 CENTURY PARK COURT, SAN DIEGO, CA 92123	
Check Box(es) that Apply: Promoter Beneficial Owner Z Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) AVERY, JAMES P SENIOR VICE PRESIDENT, ELECTRIC TRANSMISSION	
Business or Residence Address (Number and Street, City, State, Zip Code) 8330 CENTURY PARK COURT, SAN DIEGO, CA 92123	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) DAVIS, STEVEN D SENIOR VICE PRESIDENT, EXTERNAL RELATIONS AND CHIEF FINANC	IAL OFFICER
Business or Residence Address (Number and Street, City, State, Zip Code) 8330 CENTURY PARK COURT, SAN DIEGO, CA 92123	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) KYD, MARGOT A SENIOR VICE PRESIDENT, CORPORATE BUSINESS SOLUTIONS	
Business or Residence Address (Number and Street, City, State, Zip Code) 8330 CENTURY PARK COURT, SAN DIEGO, CA 92123	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) REED, WILLIAM L SENIOR VICE PRESIDENT, REGULATORY AND STRATEGIC PLANNING	3
Business or Residence Address (Number and Street, City, State, Zip Code) 8330 CENTURY PARK COURT, SAN DIEGO, CA 92123	
Check Box(es) that Apply: Promoter Beneficial Owner Z Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) SMITH, ANNE S SENIOR VICE PRESIDENT, CUSTOMER SERVICE	
Business or Residence Address (Number and Street, City, State, Zip Code) 555 W. FIFTH STREET, LOS ANGELES, CA 90013-1011	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA		
2. Enter the information requested for the following:		
• Each promoter of the issuer, if the issuer has been organized within the past five years;		
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition	of, 10% or more o	f a class of equity securities of the issuer.
• Each executive officer and director of corporate issuers and of corporate general and ma	maging partners of	partnership issuers; and
Each general and managing partner of partnership issuers.	5 7.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) STEWART, LEE M SENIOR VICE PRESIDENT, GAS TRANSMISSION		
Business or Residence Address (Number and Street, City, State, Zip Code) 555 W. FIFTH STREET, LOS ANGELES CA 90013-1011		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
FLESKES, TERRY M VICE PRESIDENT AND CONTROLLER		
Business or Residence Address (Number and Street, City, State, Zip Code)		
8330 CENTURY PARK COURT, SAN DIEGO, CA 92123		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) AULT, FRANK H DIRECTOR		
Business or Residence Address (Number and Street, City, State, Zip Code)	*	
101 ASH STREET, SAN DIEGO, CA 92101		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
(Use blank sheet, or copy and use additional copies of this s	sheet, as necessary))

		3 2 2			В. І	NFORMAT	ION ABOU	T OFFER	ING		fu ik		
1.	Has the	e issuer sol	d, or does t	he issuer i	ntend to se	ell, to non-a	ccredited	investors ii	n this offer	ing?		Yes	No
				Ans	wer also ii	Appendix	, Column 2	2, if filing	under ULC	DE.			
2.	What is	s the minin	num investn	nent that v	vill be acce	pted from a	any individ	iual?		••••••	·····	\$_25	0,000.00
												Yes	No
3.		_	permit join									12	X
4.	commis If a pers	ssion or sim son to be lis	tion request tilar remune sted is an ass ame of the b	ration for s sociated pe	solicitation erson or ag	of purchase ent of a brok	ers in conn cer or deale	ection with er registere	sales of sed with the S	curities in t SEC and/or	he offering with a state	e	
			, you may s							oluted pers	ons or sucr	•	
	'ull Name (Last name first, if individual) GOLDMAN, SACHS & CO.												
Bus	iness or	Residence	Address (N	umber an	d Street, C	ity, State, Z	(ip Code						
			NEW YOR		004								
Nan	ne of As	sociated B	roker or De	aler									
Stat	es in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)							[∕ Al	l States
	التتك	[AZ]	[ا	(47)			രക	(F)	(F)(C)	[FG]			
	[AL]	AK IN	AZ IA	KS KS	CA KY	LA LA	[CT] [ME]	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	MT	NE	NV	NH	NI	NM	$[\overline{NY}]$	NC	ND	OH	OK.	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{\mathbf{w}}$	WI	WY	PR
F., 11		T4	C 16: 1	1									
	Full Name (Last name first, if individual) J.P. MORGAN SECURITIES, INC.												
			Address (N NEW YOR			City, State, 2	Zip Code)						
Nan	ne of Ass	sociated Br	oker or Dea	aler									
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit 1	Purchasers						·
	(Check	"All States	" or check	individual	States)							[7] Al:	l States
			ريجا		(A)	ر هما		[55]	(50)	[F]	(0.1)		
	AL IL	AK IN	[AZ]	[AR]	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI	ID
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	Name (Last name	first, if indi	vidual)	·								
Bus	iness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)						
Nan	ne of Ass	sociated Br	oker of De	aler	t								
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						_
	(Check	"All States	s" or check	individual	States)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•••••••	.,		☐ All	States
	AL	AK	AZ	AR	CA	co ·	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	<u></u>	NH	NJ	NM UT	NY	NC	ND WA	OH)	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA .	WA	WV	WI	WY	PR
				(Use blar	ik sheet, or	copy and us	se additiona	l copies of	this sheet, a	is necessary	7.)		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	ce (Amount Already a) Sold (b)
	Debt			00 _{\$} 250,000.00
	Equity	·	_	\$ 0.00
	Common Preferred	·		Ψ
	Convertible Securities (including warrants)	0.00		0.00 \$
	Partnership Interests			\$ 0.00
	Other (Specify)			\$ 0.00
	Total	300,000,00	 00.0	· —————
	Answer also in Appendix, Column 3, if filing under ULOE.	,		9
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	1		\$ 250,000.00
	Non-accredited Investors			\$ 0.00
	Total (for filings under Rule 504 only)			\$ 250,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A			\$
	Rule 504			\$
	Total		_	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$
	Legal Fees			\$
	. Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)		<u></u>	\$_5,000.00 (C
	Other Expenses (identify) ISSUING AND PAYING AGENCY FEES			\$_3,000.00 (c
	Total		\mathbf{Z}	\$ 8,000.00 (c

	and total expenses furnished in response to Part C proceeds to the issuer."	ffering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gros	s	\$ 242,000.00
5.	Indicate below the amount of the adjusted gross each of the purposes shown. If the amount for check the box to the left of the estimate. The total proceeds to the issuer set forth in response to I	i		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			. 🗆 \$
	Purchase of real estate		\$	
	Purchase, rental or leasing and installation of r		¢	e
		facilities		
	Acquisition of other businesses (including the			. 🗀 🍮
	offering that may be used in exchange for the a	assets or securities of another	□ ¢	
			- -	_
	Repayment of indebtedness		_	
	Other (crosify): GENERAL CORPORATE P	URPOSES	□ ¢	\$ 242,000.0
	Other (speerry).			<u>N</u> 2
			\$	\$
	Column Totals		\$ <u></u> \$	\$ 242,000.0
				12,000.00
: -		D. FEDERAL SIĞNATÜRE		
	nature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this notic furnish to the U.S. Securities and Exchange Commi accredited investor pursuant to paragraph (b)(2) of	ssion, upon writte	
he				
lssi	ner (Print or Type) N DIEGO GAS & ELECTRIC COMPANY	Signature Sang In Faher	Date 03/23/05	
Issi SA		Signature Signature Title of Signer (Print or Type)		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

<u> </u>		E. STATE SIGNATURE							
1.		2 presently subject to any of the disqualifica							
	5	See Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on For D (17 CFR 239.500) at such times as required by state law.								
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	ner has read this notification and knows the co thorized person.	ontents to be true and has duly caused this noti	ce to be signed on its behalf by the undersig						
suer (Print or Type)	Signature	Date						
AN DI	EGO GAS & ELECTRIC COMPANY								
ame (I	Print or Type)	Title (Print or Type)							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 1 2 3 4 5 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of offered in state amount purchased in State investors in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount **Investors** Amount Yes No ALΑK AZAR CACO CT DE DCFLGA Н IDILIN ΙA KS KY LA ME MD MA MI MN MS

APPENDIX "Economic Williams A.P. 2 3 5 1 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No **Investors** Amount **Investors** Amount Yes No MO MT NE NVNH NJ NMNY NC ND OH OK OR PA RI SCSD TN TXUT VTVAWA WV WI

14.1			40.00	*1 APP	ENDIX				
1	to non-a	2 I to sell accredited as in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State WY	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
DR									